

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: David SHARONY

Art Unit: 2624

Application No.: 10/523,204

Confirmation No.: 8331

Examiner: Andrae S. Allison

I.A. Application No.: PCT/IL03/000822

I.A. Filing Date: July 27, 2003

Washington, D.C.

\$371 Date: January 18, 2006

Atty.'s Docket: SHARONY=1

For: IMAGING SYSTEM AND METHOD FOR BODY CONDITION EVALUATION

Date: July 6, 2010

U.S. Patent and Trademark Office
Customer Service Window
Randolph Building, Mail Stop AF
401 Dulany Street
Alexandria, VA 22314

Sir:
Transmitted herewith is a ☒ REPLY TO FINAL ACTION: AMENDMENT AND REMARKS in the above-identified application.

☒ Small Entity Status: Applicant claims small entity status. See 37 C.F.R. §1.27.

☒ No additional fee is required.

☐ The fee has been calculated as shown below:

(Col. 1)			(Col. 2)		(Col. 3)	
CLAIMS REMAINING AFTER AMENDMENT			HIGHEST NO. PREVIOUSLY PAID FOR		PRESENT EXTRA EQUALS	
TOTAL	29	MINUS	41		0	
INDEP.	2	MINUS	3		0	
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						

ADDITIONAL FEE TOTAL

SMALL ENTITY		
RATE		ADDITIONAL FEE
x 26	\$	
x 110	\$	
+ 195	\$	
ADDITIONAL FEE TOTAL		

OTHER THAN SMALL ENTITY		
RATE		ADDITIONAL FEE
x 52	\$	
x 220	\$	
+ 390	\$	
TOTAL		

The "Highest Number Previously Paid For" (total or independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment of the number of claims originally filed.

☒ Conditional Petition for Extension of Time

If any extension of time for a response is required, applicant requests that this be considered a petition therefor.

☐ It is hereby petitioned for an extension of time in accordance with 37 CFR 1.135(a). The appropriate fee required by 37 CFR 1.17 is calculated as shown below:

Small Entity

Response Filed Within

☐ First - \$ 65.00

☐ Second - \$ 245.00

☐ Third - \$ 555.00

☐ Fourth - \$ 865.00

Month After Time Period Set

Other Than Small Entity

Response Filed Within

☐ First - \$ 130.00

☐ Second - \$ 490.00

☐ Third - \$ 1110.00

☐ Fourth - \$ 1730.00

Month After Time Period Set

☐ Less fees (\$) already paid for ____ month(s) extension of time on ____.

☐ Please charge my Deposit Account No. 02-4035 in the amount of \$.

☐ Payment in the amount of \$. will be made using the on-line filing system.

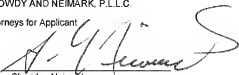
☐ A check in the amount of \$. is attached (check no.).

☒ The Commissioner is hereby authorized and requested to charge any additional fees which may be required in connection with this application or credit any overpayment to Deposit Account No. 02-4035. This authorization and request is not limited to payment of all fees associated with this communication, including any Extension of Time fee, not covered by check or specific authorization, but is also intended to include all fees for the presentation of extra claims under 37 CFR §1.16 and all patent processing fees under 37 CFR §1.17 throughout the prosecution of the case. This blanket authorization does not include patent issue fees under 37 CFR §1.18.

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